

U.S. Agency for International Development

> Bureau for Global Health

COUNTRY PROFILE

HIV/AIDS

BOLIVIA

Bolivia, with an adult HIV prevalence of under 0.1 percent, has a "low level" HIV/AIDS epidemic that has not yet penetrated the general population. The first cases of AIDS were identified in 1984, and by December 2002, 411 AIDS cases had been reported. At the end of 2002, approximately 5,300 people (including 192 children) were estimated to be living with HIV/AIDS. This

Estimated Number of Adults and Children Living with HIV/AIDS (end 2002)	5,300
Total Population (2002)	8,300,000
Adult HIV Prevalence (end 2002)	> 0.1%
HIV-1 Seroprevalence in Urban Areas	
Population at high risk (i.e., sex workers and clients, STI patients, or others with known risk factors)	0.6%
Population at low risk (i.e., pregnant women, blood donors, or others with no known risk factors)	0.1%

Sources: Bolivia National STI/HIV/AIDS Program

number includes all people living with HIV infection (whether or not they have developed symptoms of AIDS). During 2002, 10 AIDS deaths and 57 new AIDS cases were reported. Some 10 children today are AIDS orphans, having lost their mother or both parents to AIDS.

Among reported AIDS cases, most (84 percent) acquired the infection through sexual transmission: 51 percent through heterosexual contact; and 19 percent through homosexual contact. Approximately 2.5 percent of cases were acquired through mother-to-child transmission, and 3 percent through blood or blood products. Of the 411 reported AIDS cases, 65 percent occurred among men and 35 percent among women. The vast majority—about 90 percent—were diagnosed in people 15–49 years old. Some data suggest that among the 5,300 people currently infected, the difference between men and women is no longer as high, particularly in the 15–24 age group, where prevalence estimates for men range from 0.10 to 0.15 percent and for women, from 0.06 to 0.10 percent.

Sentinel surveillance data provide the following information about HIV/AIDS in Bolivia:

• Adult HIV/AIDS prevalence in December 2001 was under 0.1 percent. A 2001 sentinel surveillance study among the general population in the three largest Bolivian cities also found a prevalence of less than 0.1 percent.



Map of Bolivia: PCL Map Collection, University of Texas

- HIV/AIDS prevalence among female commercial sex workers has remained low, in part because commercial sex workers are required to be registered and must be tested every three months to keep their health certificates. Among commercial sex workers in La Paz, HIV prevalence in 2002 was 0.19 percent; in Santa Cruz, it was 0.60 percent. In five of nine departments, HIV prevalence is zero.
- HIV prevalence levels among pregnant women sampled in 2001 were 0.29 percent in La Paz and 0.87 percent in Santa Cruz.
- Although HIV prevalence is low, high rates of sexually transmitted infections among female sex workers are a cause for concern. In 2002, prevalence rates for gonorrhea, syphilis, and chlamydia among this group were 1.8 percent, 4.1 per-

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cent, and 7.7 percent, respectively. Prevalence rates for syphilis and gonorrhea in the general population were 0.19 percent and 0.2 percent, respectively (2002 data).

National Response

In 1986, within a year after AIDS was first detected in Bolivia, a national HIV/AIDS plan was integrated into the national sexually transmitted infection control program. Established by the Ministry of Health, the plan outlined strategies for HIV prevention, education and social communication, care for people living with HIV/AIDS, and safety of the blood supply. According to the Ministry of Health, the strategic plan today advocates multisectoral coordination to prevent, control, and mitigate the social impact of diseases such as HIV/AIDS.

The country's health system currently reaches only about 70 percent of the population; the remaining 30 percent live in rural and impoverished areas. Bolivia has high prevalences of tuberculosis, malaria, Chagas disease, leishmaniasis, dengue fever and yellow fever. Maternal and child mortality rates are among the highest in South America. According to the Government of Bolivia, the majority of health funds are allocated toward these problems, and few resources are available for HIV/AIDS prevention and care.

USAID Support

Because HIV/AIDS in Bolivia is still largely limited to a few high-risk populations, the U.S. Agency for International (USAID) focuses its efforts on supporting the Ministry of Health's prevention objectives, allocating \$650,000 for HIV/AIDS prevention in Bolivia in 2002. USAID has been and continues to be the major source of support for the Ministry of Health's National AIDS Control Program and HIV/AIDS/STI control strategy. USAID's programming in this area includes support for condom social marketing; public information and education campaigns; capacity strengthening for diagnosis and treatment of sexually transmitted infections; and sentinel surveillance. Many of these activities are conducted by national and local nongovernmental organizations with USAID support. In 1985, USAID supported the creation of ProSalud, a Bolivian nongovernmental organization active in health information, education, and communication.

Condom social marketing

USAID implements a condom social marketing program in Bolivia through ProSalud, which that has received technical assistance from Population Services International with USAID support. Condoms are sold through a national distribution network, with approximately 3,000 points of sale, including pharmacies, supermarkets, sporting goods stores, music stores, liquor stores, brothels, bars, discotheques, and nightclubs. ProSalud also works with other local nongovernmental organizations to sell condoms through community-based distribution systems. Female condoms are sold primarily in pharmacies and brothels. Condom promotion activities include television and radio ads, billboards, sponsorship of sports teams, and promotional giveaways.

Information and education

USAID supports a range of activities to provide public information and education about HIV/AIDS to various segments of the population. With USAID support, Populations Services International transferred its information and education capabilities to ProSalud. ProSalud is now becoming a leader in HIV/AIDS/STI prevention, in coordination with the National STI/HIV/AIDS Program. More targeted education activities are designed for populations at particular risk for HIV transmission, including the military, police, truck drivers, and migrant workers. Mobile video units have been used to reach rural populations.

USAID also supports HIV/AIDS/STI prevention activities conducted by local nongovernmental organizations. ProSalud, Centro de Investigación, Educación y Servicios, and CARE/Bolivia carry out community-level interventions in major urban centers, with a special focus on female commercial sex workers, men who have sex with men, university and high school students, and police and military personnel. The Center for Communications Programs manages a telephone hotline on sexual health, which is an important source of information on HIV/AIDS/STIs.

Capacity strengthening: diagnosis, treatment, and care

Through CARE, USAID has funded HIV prevention programs that improve health care services in Bolivia and facilitate better identification and treatment of sexually transmitted infections. Nurses and community volunteers educate people about high-risk behaviors, condom use, and the importance of testing and treatment of sexually transmitted infections.

The Centers for Disease Control and Prevention, with financial support from USAID and in collaboration with the Bolivian Ministry of Health, has provided technical assistance for the development of syndromic management of sexually transmitted infection, STI/HIV prevention guidelines, and targeted interventions for commercial sex workers and men who have sex with men. The project designed a model for integrated clinical and behavioral services for sexually transmitted infections that has been implemented in nine cities throughout Bolivia. Health care personnel receive extensive training in clinical care and laboratory diagnostics for sexually transmitted infections and HIV/STI counseling.

Sentinel surveillance

One of USAID's most significant contributions to HIV/AIDS research is the network of sentinel surveillance sites for sexually transmitted infection and AIDS. The Centers for Disease Control and Prevention project developed sentinel surveillance systems that track sexually transmitted infection rates among female commercial sex workers, as well as in the general population in the city of El Alto and elsewhere. At additional sites in Cochabamba, La Paz, and Santa Cruz, supported by USAID and developed by Management Sciences for Health, incidence data are gathered on the general population. Additional research supported by USAID includes periodic sexual behavior studies, studies to track the drug resistance of gonorrhea, and validation studies of syndromic management of sexually transmitted infections.

For more information

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USAID HIV/AIDS Web site, Bolivia: www.usaid.gov/pop health/aids/Countries/lac/bolivia.html

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